

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mury		9-19-00
O.I.P.E. CLASSIFIER		15	10-20-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted 0 ..... Objected

Claim	Date
Final	
Original	9-12-00
1	✓ Z
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5	✓ Z
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9	✓ Z
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12	✓ Z
13	✓ Z
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18	✓ Z
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here